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## BIB DATA SHEET

CONFIRMATION NO. 9006

SERIAL NUMBER	FILING or 371(c) DATE RULE	CLASS	GROUP ART UNIT	ATTORNEY DOCKET NO.		
10/583,188	03/22/2007	435	1633	FDEHN11.001APC		
<b>APPLICANTS</b> Myrtle Gordon, Berkshire, UNITED KINGDOM; Nagy Habib, London, UNITED KINGDOM; <b>** CONTINUING DATA *****</b> This application is a 371 of PCT/GB04/05365 12/20/2004 <b>** FOREIGN APPLICATIONS *****</b> UNITED KINGDOM 0329449.3 12/19/2003 <b>** IF REQUIRED, FOREIGN FILING LICENSE GRANTED **</b> 08/19/2007						
Foreign Priority claimed <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No 35 USC 119(a-d) conditions met <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Verified and Acknowledged <u>/ILEANA POPA/</u> Examiner's signature		<input type="checkbox"/> Met after Allowance <u>Initials</u>	<b>STATE OR COUNTRY</b> UNITED KINGDOM	<b>SHEETS DRAWINGS</b> 16	<b>TOTAL CLAIMS</b> 39	<b>INDEPENDENT CLAIMS</b> 4
<b>ADDRESS</b> KNOBBE MARTENS OLSON & BEAR LLP 2040 MAIN STREET FOURTEENTH FLOOR IRVINE, CA 92614 UNITED STATES						
<b>TITLE</b> Stem Cells						
<b>FILING FEE RECEIVED</b> 3340	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:			<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit		